

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

**Apr 29 1997 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000047525 (6)

1. Corporation Name
A+ POOLS, INC.



Principal Place of Business
**3300 DAVID BOULEVARD
NAPLES FL 33962**

Mailing Address
**3300 DAVID BOULEVARD
NAPLES FL 34104-5002**

3. Date Incorporated or Qualified
05/29/1996

3a. Date of Last Report

4. FEI Number
65-0683515

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business

21 **3300 Davis Boulevard**

Suite, Apt. #, etc.

22

City & State

23

Zip **34104** Country

24 25

2a. Mailing Address

26 **3300 Davis Boulevard**

Suite, Apt. #, etc.

27

City & State

28

Zip Country

29 30

9. Name and Address of Current Registered Agent

**RICE, ROGER B
800 SEAGATE DRIVE
SUITE 203
NAPLES FL 33940**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE DELETE

NAME **D RAUSCH, CHRIS**

STREET ADDRESS **140 DEBRON DRIVE**

CITY-ST-ZIP **NAPLES FL 33962**

TITLE DELETE

NAME **D RAUSCH, DEBORAH**

STREET ADDRESS **140 DEBRON DRIVE**

CITY-ST-ZIP **NAPLES FL 33962**

TITLE DELETE

NAME **D KRANTZ, ROBERT**

STREET ADDRESS **2584 LONGBOAT DRIVE**

CITY-ST-ZIP **NAPLES FL 33942**

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *[Handwritten Signature]* 11 22 97 211 222 5026

CR2E034 (9/96)